

PTO/SB/31 (02-01)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCESDocket Number (Optional)
015114-050310USI hereby certify that this correspondence is being facsimile
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on February 3, 2003

Signature

Typed or printed
name J. Matthew Zigmant

In re Application of

Srinivas Reddy et al.

Application Number

09/832,685

Filed

April 10, 2001

For

Tristate Structures for Programmable Logic Devices

Group Art Unit
2819Examiner
Daniel D. ChangApplicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the
examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$320.

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above
is reduced by half, and the resulting fee is:

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☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have
enclosed a duplicate copy of this sheet.☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to
Deposit Account No. 20-1430. I have enclosed a duplicate copy of this sheet.☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.WARNING: Information on this form may become public. Credit card information should not be included on this
form. Provide credit card information and authorization on PTO-2038.

I am the

☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed.

☐ attorney or agent of record.☒ attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a), 44,005.

J. Matthew Zigmant, Reg. No. 44,005

Typed or printed name

February 3, 2003

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple
forms if more than one signature is required, see below.☐ *Total of _____ forms are submitted.Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual. Comments on
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